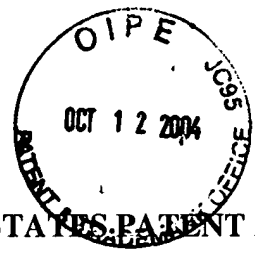
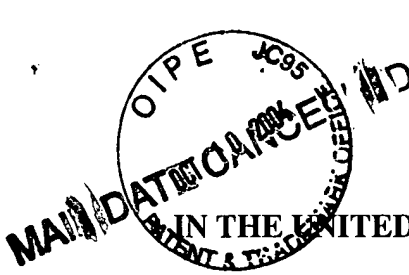


41



PATENT 2683 \$

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In Re Application )  
No. 09/816,559 ) For: Wireless Communications with an  
 ) Adaptive Antenna Array  
 )  
Tao Chen et al. )  
 )  
Examiner: Danh Le )  
 )  
Filed: March 23, 2001 ) Group No. 2683

RECEIVED  
OCT 18 2004  
Technology Center 2600

RESPONSE TO OFFICE ACTION

Mail Stop Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Dear Commissioner:

In response to the Office Action dated April 8, 2004 please amend the above-identified application as indicated below. Applicant hereby petitions a three (3) month Extension of Time.

CERTIFICATE OF MAILING/TRANSMISSION (37 CFR 1.8(a))

I hereby certify that this correspondence is, on the date shown below, being:

**MAILING**

☒ deposited with the United States Postal Service with sufficient postage as first class mail, in an envelope addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Depositor's Name: Sheryl Schoen  
(type or print name)

Date: October 8, 2004

Signature: Sheryl Schoen

**FACSIMILE**

☐ transmitted by facsimile to the Patent and Trademark Office.

Depositor's Name: \_\_\_\_\_  
(type or print name)

Date: \_\_\_\_\_

Signature: \_\_\_\_\_

10/13/2004 FFAHAI2 00000019 09816559  
02 FC:1201 880.00 DA

## AMENDMENT TRANSMITTAL FORM

Mail Stop Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Customer No.: 23696  
Attorney Docket No.: 000436  
In Re Application of: Tao Chen et al  
Serial Number: 09/816,559  
Filed: March 23, 2001  
Examiner: Danh Le  
Group Art Unit: 2683

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Technology Center 2600

Dear Sir:

Transmitted herewith for filing is a Response to Office Action in the above identified application.

CLAIMS	(a) Number Remaining After Amendment	(b) Highest Number Previously Paid For	(c) Extra Claims	Large Entity Fee	Fee Paid	
Total*	102	102	0	x \$18 =	\$0.00	
Independent**	16	6	10	x \$88 =	\$880.00	
Multiple Dependent Claim(s): <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				\$300	\$0.00	
EXTENSION FEES				<input type="checkbox"/> One Month	\$110	\$0.00
				<input type="checkbox"/> Two Months	\$430	\$0.00
				<input checked="" type="checkbox"/> Three Months	\$980	\$980.00
TERMINAL DISCLAIMER				\$110	\$	
				TOTAL FEE	\$1860.00	

\*If the number in column a is less than 20, enter 0 in column c.

\*\*If the number in column a is less than 3, enter 0 in column c.

4. ☐ Fee check in the amount of \$\_\_\_\_\_ is enclosed to pay for any claim and/or extension fees.
5. ☒ Please charge Deposit Account No. 17-0026 of QUALCOMM Incorporated the amount of \$1860.00.  
The Commissioner is hereby authorized to charge payment of any additional fees which may be required, or credit any overpayment to said Deposit Account No. 17-0026. A duplicate of this sheet is enclosed for fee processing.
6. ☒ The Commissioner is further hereby authorized to charge to said Deposit Account No. 17-0026, pursuant to 37 CFR 1.25(b), any fee whatsoever which may become properly due or payable, as set forth in 37 CFR 1.16 to 37 CFR 1.18 inclusive, for the entire pendency of this application without specific additional authorization.

Date: October 8, 2004

Signature: Roberta A. YoungRoberta A. Young, Reg. No. 59,818  
(858) 658-5803

QUALCOMM Incorporated  
Attn: Patent Department  
5775 Morehouse Drive  
San Diego, California 92121-1714  
Telephone: (858) 658-5787  
Facsimile: (858) 658-2502

## CERTIFICATE OF MAILING/TRANSMISSION (37 CFR 1.8(a))

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Depositor's Name: Sheryl Schoen  
(type or print name)

Date: October 8, 2004

## FACSIMILE

- ☐ transmitted by facsimile to the Patent and Trademark Office.

Depositor's Name: \_\_\_\_\_  
(type or print name)

Signature: Sheryl Schoen